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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is or your government-issued picture identification (for example, your driver's license or passport).	First name	First name Middle name	
	Bring your picture identification to your meeting with the trustee	Slaughter Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you ha			
	Include your married or maiden names.			
3.	Only the last 4 digits o your Social Security number or federal Individual Taxpayer Identification number (ITIN)	f xxx-xx-5427		

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Case number (if known)

Debtor 1 Shandra M. Slaughter

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	2265 Windsor Lane	If Debtor 2 lives at a different address:
		Country Club Hills, IL 60478 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Shandra M. Slaughter

	The chapter of the	a					
	Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.	
	choosing to file under	☐ Chapter 7					
		☐ Cha	apter 11				
		☐ Cha	apter 12				
		■ Cha	apter 13				
3.	How you will pay the fee	_ a	bout how yo	ou may pay. Typi attorney is subm	cally, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with	
					allments. If you choose this optio (Official Form 103A).	n, sign and attach the Application for Individuals to Pay	
			request that	nt my fee be wai uired to, waive y	ved (You may request this option our fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out	
						ial Form 103B) and file it with your petition.	
	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes			14 0		
			District			Case number	
			District		When	Case number	
			District		When	Case number	
	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
	Do you rent your residence?	■ No.	Go to	ine 12.			
	residence?	☐ Yes	Has yo	our landlord obtain	ned an eviction judgment agains	t you and do you want to stay in your residence?	
				No. Go to line 1	2.		
				Yes. Fill out Initional bankruptcy peti		Judgment Against You (Form 101A) and file it with this	

Debtor 1 Shandra M. Slaughter

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Case number (if known)

Part	Report About Any Bu	sinesses	You Own	as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of busines	es	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code		
	it to this petition.		Check		describe your business:	
				Health Care Business	s (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real Est	ate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defin	ed in 11 U.S.C. § 101(53A))	
				Commodity Broker (a	s defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure S.C. 1116(1)(B).			
	For a definition of small	No.	I am n	ot filing under Chapter	11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ing under Chapter 11,	but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am fi	ing under Chapter 11 a	and I am a small business debtor according to the definition in the Bankruptcy Code.	
Pari	A: Report if You Own or	Have Any	Hazardo	us Property or Any Pi	roperty That Needs Immediate Attention	
	Do you own or have any		Tiuzui uo	as i roperty of Ally i i	operty that recease infinediate Attention	
14.	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is t	he hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	mber, Street, City, State & Zip Code	

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Debtor 1 Shandra M. Slaughter

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

am not required to receive a briefing about credi
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Shandra M. Slaug	hter	Document	Page 6 01 66 Case numbe	₽ (if known)
Par			eporting Purposes		
	What kind of debts do you have?	16a.	Are your debts primarily cons	umer debts? Consumer debts are definal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			■ Yes. Go to line 17.		
		16b.		ness debts? Business debts are debts nent or through the operation of the business	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe	that are not consumer debts or busines	s debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7.	Go to line 18.	
	Do you estimate that after any exempt property is excluded and	☐ Yes.		ou estimate that after any exempt prop ble to distribute to unsecured creditors?	erty is excluded and administrative expenses
	administrative expenses are paid that funds will be available for		□ No □ Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do you estimate that you	1 -49		☐ 1,000-5,000	<u> 25,001-50,000</u>
	owe?	☐ 50-99 ☐ 100-1 ☐ 200-9	99	□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to	= \$0 - \$	•	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	be worth?		001 - \$100,000 ,001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you estimate your liabilities	□ \$0 - \$	550,000	□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion
	to be?		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t7: Sign Below				
For	you	I have ex	kamined this petition, and I declare	e under penalty of perjury that the inform	nation provided is true and correct.
				am aware that I may proceed, if eligible, f available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.
				pay or agree to pay someone who is no otice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this
		I request	t relief in accordance with the chap	oter of title 11, United States Code, spec	cified in this petition.
		bankrupt and 357	tcy case can result in fines up to \$ 1.		or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519
			ndra M. Slaughter ra M. Slaughter	Signature of Debto	r 2
			e of Debtor 1	- J	
		Executed	d on June 12, 2017 MM / DD / YYYY	Executed on	/ DD / YYYY
			141141 / DD / 1 1 1 1	IVIIVI	, ,

Debtor 1 Shandra M. Slaughter Document Page 7 of 66 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kevin F	Rouse ARDC	Date	June 12, 2017	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Kevin Rou	ise ARDC			
Printed name				
Ledford, V	Vu & Borges, LLC			
Firm name				
105 W. Ma	dison			
23rd Floor	r			
Chicago, I	L 60602			
Number, Street,	City, State & ZIP Code			
Contact phone	312-853-0200	Email address	notice@billbusters.com	
#6284394				
Bar number & S	tate			

Page 8 of 66 Document Case number (if known) Debtor 1 Shandra M. Slaughter Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. □ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts No. I am not filing under Chapter 7. Go to line 18. 17. Are you filing under Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses □ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1.000-5.000 25.001-50.000** 1-49 you estimate that you □ 5001-10,000 **50.001-100.000** 50-99 owe? 10,001-25,000 ☐ More than 100,000 100-199 200-999 19. How much do you ☐ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1.000.000.001 - \$10 billion **550,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million ☐ \$10,000,000,001 - \$50 billion ☐ \$100.001 - \$500.000 □ \$100,000,001 - \$500 million ☐ \$500,001 - \$1 million ☐ More than \$50 billion 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? ☐ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion ☐ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptey case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 35 Signature of Debtor 2 Shandra M. Slaughter Signature of Debtor 1

Executed on

June 5, 2017

MM / DD / YYYY

Executed on

MM / DD / YYYY

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Debtor 1 Shandra M. Slaughter	Fill in this inform	nation to identify your	case:			
Debtor 2 (Spouse If, Iffing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If Norwin) Check if this is an amended filling Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to sears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy Pelition Preparer's Notice Declaration, and Signature (Official Form 1 Under penalty of perjung, I declare that I have read the summary and schedules filed with this declaration and	Debtor 1				<u> </u>	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known)	Dobtos 2	First Name	Middle Name	Last Name		
Case number (if known) Check if this is an amended filling Check if this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to dears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 1). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and		First Name	Middle Name	Last Name		
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12 It wo married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 3 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 1) Under penalty of perjuty, I declare that I have read the summary and schedules filed with this declaration and	United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Declaration About an Individual Debtor's Schedules f two married people are filing together, both are equally responsible for supplying correct information. four must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, o obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to breats, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 1) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and			· · · · · · · · · · · · · · · · · · ·			
Cou must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to sears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 1). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and			n Individual	Debtor's Scl	hedules	12/15
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 1). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and	f two married pe	ople are filing together	, both are equally respor	nsible for supplying corre	ect information.	
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 1) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and	btaining money	or property by fraud in	connection with a bank			
No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 1) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and	Sign	Below				
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 1) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and	Did you pay	or agree to pay some	one who is NOT an attorn	ney to help you fill out ba	inkruptcy forms?	
Declaration, and Signature (Official Form 1	■ No					
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	☐ Yes. Na	ame of person				
Shandra M. Slaughter Signature of Debtor 2 Signature of Debtor 1	that they are	true and cokrect. a M. Slaughter	hat I have read the sumi	x		1

Date June 5, 2017

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with a bankruptcy case can result in fines up to 18 U.S.C. §§ 152, 1341, 1519, and 3571.	\$250,000, or imprisonment for up to 20 years, or both.
Strandra M. Slaughter Signature of Debtor 1	Signature of Debtor 2
Date June 5, 2017	Date
Did you attach additional pages to <i>Your Stateme</i> ■ No □ Yes	ent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not	t an attorney to help you fill out bankruptcy forms?
☐ Yes. Name of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Shandra M. Slaughter Debtor 1

Case number (if known)

16	. Calculate the median family income that applies to	you. Follow these steps:		
	16a. Fill in the state in which you live.	L		
	16b. Fill in the number of people in your household.	2		
	16c. Fill in the median family income for your state and	size of household.	\$	66,487.00
	To find a list of applicable median income amount instructions for this form. This list may also be avaint.		separate	
17	. How do the lines compare?	mable at the bankruptcy clerk's office.		
	17a. Line 15b is less than or equal to line 16c.	On the top of page 1 of this form, check b	oox 1. Disposable income is not a	determined under
	11 U.S.C. § 1325(b)(3). Go to Part 3. Do	NOT fill out Calculation of Your Disposab	le Income (Official Form 122C-2).
98000901	17b. Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14	ulation of Your Disposable Income (Of		
Par	3: Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Copy your total average monthly income from line	11	\$	0.00
19.	Deduct the marital adjustment if it applies. If you are contend that calculating the commitment period under spouse's income, copy the amount from line 13.	11 U.S.C. § 1325(b)(4) allows you to dedu		
	19a. If the marital adjustment does not apply, fill in 0 or	i line 19a.	- \$	0.00
				-
	19b. Subtract line 19a from line 18.		\$	0.00
			<u> </u>	
20.	Calculate your current monthly income for the year	·		0.00
	20a. Copy line 19b		\$	0.00
	Multiply by 12 (the number of months in a year).		X	12
	20b. The result is your current monthly income for the y	vear for this part of the form	\$	0.00
			<u> </u>	
	20. Counties modien forth income for your state and	atas of house to but force they do		66,487.00
	20c. Copy the median family income for your state and	size of nousehold from lifte 160	\$_	00,467.00
	21. How do the lines compare?			
	Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by the court, on the top of pag	ge 1 of this form, check box 3, \mathcal{T}_{i}	he commitment
	Line 20b is more than or equal to line 20c. U	nless otherwise ordered by the court, on t	the top of page 1 of this form ich	eck box 4. The
	commitment period is 5 years. Go to Part 4.		op er page i et ane tettin, et	
Part	4: Sign Below			
(X	By signing here, under penalty of perjury I declare that	the information on this statement and in a	iny attachments is true and corre	ect.
(,	Shandra M. Slaughter Signature of Debtor 1			
	Date June 5, 2017			
	MM / DD / YYYY			
	If you checked 17a, do NOT fill out or file Form 122C-2.			
	If you checked 17b, fill out Form 122C-2 and file it with	this form. On line 39 of that form, convivo	our current monthly income from	line 14 above

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: June 5, 2017
Signed:
Shandra M. Slaughler

Kevin Rouse ARDC #6284394
Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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United States Bankruptcy Court Northern District of Illinois

In re	Shandra M. Slaughter		Case No.	
		Debtor(s)	Chapter 13	
	VI	ERIFICATION OF CREDITOR M	MATRIX	
		Number o	f Creditors:	30
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of cred	itors is true and correct to	the best of my
	June 5, 2017			

Page 14 of 66 Document Fill in this information to identify your case: Debtor 1 Shandra M. Slaughter Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	23,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,163.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	38,163.00
Pa	rt 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	9,636.49
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	58,256.1
	Your total liabilities	\$	67,892.64
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,411.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,074.00
Pa	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 15 of 66 Case number (if known) Debtor 1 Shandra M. Slaughter

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

3,928.45

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	2,801.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,801.00

-:11	in this inform				cument	Page 16 of 66	17 11:02:00	Desc	, ividii i
			y your case and t	inis tiling):				
Deb	tor 1	Shandra M. First Name		lle Name		Last Name			
	tor 2								
(Spot	ise, if filing)	First Name	Midd	lle Name		Last Name			
Unit	ed States Ban	kruptcy Court fo	r the: NORTHE	RN DIST	RICT OF ILL	INOIS			
Cas	e number					_			Check if this is an amended filing
Off	icial For	m 106A/E	3						
Sc	hedule	A/B: P	roperty						12/15
hink nfori	it fits best. Be mation. If more er every questi	as complete and space is needed, on.	accurate as possil attach a separate	ole. If two sheet to t	married peop his form. On th	an asset fits in more than one le are filing together, both are he top of any additional pages wn or Have an Interest In	equally responsible	e for supp	lying correct
		-				a, land, or similar property?			
_		, ,	4	u,		,, iaiia, e. eiiiiia. p.epe.iy.			
_	No. Go to Part 2								
_	Yes. Where is	tne property?							
1.1				What	is the proper	ty? Check all that apply			
	2265 Winds		a a vintia a	_	Single-family	home			s or exemptions. Put
	Street address, ii	available, or other de	scription			ulti-unit building n or cooperative			laims on Schedule D: Secured by Property.
						•			
	Carrature Cl	ال جالانات ال	C0470 0000			d or mobile home	Current value of		Current value of the
	Country Cl	State	60478-0000 ZIP Code		Land Investment p	roperty	entire property?	-	oortion you own? \$23,000.00
	o.i.y	Ciaio	2 0000		Timeshare	торсту			. ,
					Other De	ebtor's Residence	(such as fee sim	ole, tenano	r ownership interest by by the entireties, or
				Who		st in the property? Check one	a life estate), if k	iown.	
	Cook				Debtor 1 only Debtor 2 only		-		
	County					l Debtor 2 only		_	
					At least one	of the debtors and another you wish to add about this ite	(see instruction		unity property
					erty identificat		iii, sucii as local		
	pages you ha	ve attached for	-		-	from Part 1, including any			\$23,000.00
Part	2: Describe Y	our Vehicles							
						whether they are registere Executory Contracts and Union		any vehic	cles you own that
3. C	ars, vans, trud	cks, tractors, s	port utility vehicl	es, moto	orcycles				
	No								

☐ Yes

Del	otor 1	Shandra M.	Slaughter	Document	Page 17 of 66 Case number	(if known)	
			•		cles, other vehicles, and accessor nowmobiles, motorcycle accessories	ies	
	No						
] Yes						
					rom Part 2, including any entries fo		
			nal and Household Item		ving itama?	Current value of the	
		ŕ		erest in any of the follow	ving items?	Current value of the portion you own? Do not deduct secured claims or exemptions.	
1		old goods and f es: Major appliar	urnishings ices, furniture, linens, o	china, kitchenware			
		Describe					
			Loveseat, Enterta Table/Chairs, Ref Washer/Dryer, Po Bedroom Sets, L	ainment Center, Coff frigerator, Freezer, S ots/Pans, Dishes/Flat	ishings, including: Sofa, ee Table, End Tables, Dining tove, Microwave, Dishwasher, ware, Vacuum, Coffee Maker, e Cabinet, Desk & Chair,		
			HAVE CLIENT GO			\$800.00	
[⊒ No	es: Televisions a	nd radios; audio, video phones, cameras, me		pment; computers, printers, scanners	; music collections; electronic devices	
			Television, DVD Cell Phone.	Player, Tablet, Video	-Game System, Stereo, and	\$600.00	
	Example ■ No		figurines; paintings, prons, memorabilia, colle		oks, pictures, or other art objects; sta	mp, coin, or baseball card collections;	
	 Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe 						
	Firearm Examp ■ No		s, shotguns, ammunitio	on, and related equipmen	ıt		
		Describe					
_	Clothes Examp ☐ No		othes, furs, leather coa	ats, designer wear, shoes	, accessories		
ı	Yes.	Describe					
			Necessary Weari	ing Apparel		\$1,000.00	

page 2

De	btor 1	Shandra M.	Slaught	DOCL er	iment Page 18	OT 66 Case number (if known)	
	□ No [′]		welry, cos	stume jewelry, engageme	nt rings, wedding rings, heirl	oom jewelry, watches, gems,	gold, silver
				s of Earrings, 2 Brace me Jewelry	elets, 1 Watch, 2 Neckla	aces, 3 Pieces of	\$400.00
	Examp ■ No	arm animals ples: Dogs, cats,	birds, hor	ses			
14.	Any otl ■ No			•	Iready list, including any h	nealth aids you did not list	
15			•	•	including any entries for p	. •	\$2,800.00
Pa	rt 4: De	scribe Your Finan	icial Asset	s			
Do	you ow	vn or have any I	egal or e	quitable interest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			our wallet, in your home, i		n hand when you file your petit	ion
						Cash	\$7.00
	Examp —	0,	0 /	·	certificates of deposit; share the same institution, list eac	es in credit unions, brokerage h.	houses, and other similar
	□ No ■ Yes				Institution name:		
			17.1.	Checking	First Midwest Bank		\$30.00
			17.2.	Prepaid debit card	Expectations Cash De	eposit Card	\$30.00
	Examp		•	ly traded stocks ent accounts with brokera	ge firms, money market acco	punts	
	■ No □ Yes			Institution or issuer name	: :		
	joint v	ublicly traded st enture	tock and	interests in incorporate	d and unincorporated busi	inesses, including an intere	st in an LLC, partnership, and
	■ No □ Yes.	Give specific inf		about themne of entity:		% of ownership:	
20.	Negoti	iable instruments	include p	ersonal checks, cashiers	e and non-negotiable instr ' checks, promissory notes, to someone by signing or do	and money orders.	
	No						

	Case 17-179	23 C	oc 1			Desc Main
ebtor 1	Shandra M. Slau	ghter		Document	Case number (if know)	n)
☐ Yes.	Give specific informat					
			eogh, 401	(k), 403(b), thrift saving	s accounts, or other pension or profit-sharin	ng plans
Yes.		,	count:	Institution r	name:	
	40	01(k)		Through	Employer	
				No cash	surrender value	\$12,296.00
Your sl Examp	hare of all unused dep	oosits you	ı have ma			anies, or others
				Institution r	name or individual:	
Annuiti ■ No	ies (A contract for a p	eriodic pa	lyment of	money to you, either fo	r life or for a number of years)	
☐ Yes	lssuer	name and	d descripti	on.		
26 U.S.0 ■ No	C. §§ 530(b)(1), 529A	(b), and 5	29(b)(1).			•
■ No	·			rty (other than anythir	g listed in line 1), and rights or powers e	xercisable for your benefit
Examp ■ No	oles: Internet domain r	names, we	ebsites, pı			
Examp ■ No	oles: Building permits,	exclusive	licenses,		n holdings, liquor licenses, professional lice	nses
oney or	property owed to yo	u?				Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	•	ion about	them, inc	cluding whether you alre	ady filed the returns and the tax years	
Examp ■ No	oles: Past due or lump		nony, spou	usal support, child supp	ort, maintenance, divorce settlement, prope	rty settlement
Examp ■ No	oles: Unpaid wages, di benefits; unpaid	isability in loans you			efits, sick pay, vacation pay, workers' comp	pensation, Social Security
	□ Yes. Retirem Examp □ No ■ Yes. Securit Yours Examp ■ No □ Yes. Annuit ■ No □ Yes. Interest 26 U.S.0 ■ No □ Yes. Patents Examp ■ No □ Yes. License Examp ■ No □ Yes. Trusts, No □ Yes. Patents Examp ■ No □ Yes. Chera Examp ■ No □ Yes. Othera Examp ■ No □ Yes.	Security deposits and prep Yes. List each account sep Yes. List each account sep Your share of all unused dep Examples: Agreements with No Yes. List each account for a p No Yes. Manuities (A contract for a p No Yes. Issuer Interests in an education IR 26 U.S.C. §§ 530(b)(1), 529A No Yes. Institut Trusts, equitable or future No Yes. Give specific informat Patents, copyrights, tradent Examples: Internet domain r No Yes. Give specific informat Licenses, franchises, and of Examples: Building permits, No Yes. Give specific informat Licenses, franchises, and of Examples: Building permits, No Yes. Give specific informat Tax refunds owed to you No Yes. Give specific informat Tax refunds owed to you No Yes. Give specific informat Pamily support Examples: Past due or lump No Yes. Give specific informat Other amounts someone of Examples: Unpaid wages, of benefits; unpaid No	Security deposits and prepayments Yes. List each account separately. Type of acc 401(k) Security deposits and prepayments Your share of all unused deposits you Examples: Agreements with landlords No Yes. List each account for a periodic parameters (A contract for a periodic parameters) No Yes	Shandra M. Slaughter Yes. Give specific information about them Issuer name: Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401 No Yes. List each account separately. Type of account: 401(k) Security deposits and prepayments Your share of all unused deposits you have ma Examples: Agreements with landlords, prepaid No Yes	Bocument Shandra M. Slaughter	bitle of 1 Shandra M. Slaughter Yes. Give specific information about them Issuer name: Retirement or pension accounts Retirement or pension accounts Examples: Interests in IRA, ERISA, Koogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing No No No No No No No N

Official Form 106A/B Schedule A/B: Property page 4

	Case 17-179	23 Doc 1	Filed 06/13/17 Document	Entered 06/13/17 11:02:58 Page 20 of 66	Desc Main
Debtor 1	Shandra M. Slau	ghter		Case number (if known)	
	sts in insurance polic ples: Health, disability,		nealth savings account (HSA); credit, homeowner's, or renter's insural	nce
■ Yes.	Name the insurance c	ompany of each p Company name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
			rance Policy through Cash Surrender Val		\$0.00
If you some		a living trust, exped	a someone who has die ct proceeds from a life in	od surance policy, or are currently entitled to rec	eive property because
Exam ■ No		yment disputes, in	you have filed a lawsui surance claims, or rights	t or made a demand for payment to sue	
■ No □ Yes.	Describe each claim			g counterclaims of the debtor and rights to	set off claims
■ No	nancial assets you did Give specific informat	-			
				ny entries for pages you have attached	\$12,363.00
Part 5: De	escribe Any Business-Re	elated Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
■ No. G	own or have any legal or o to Part 6.	r equitable interest	in any business-related p	roperty?	
	escribe Any Farm- and Co you own or have an interes		Related Property You Own	n or Have an Interest In.	
■ No.	u own or have any leg . Go to Part 7. s. Go to line 47.	gal or equitable ir	nterest in any farm- or o	commercial fishing-related property?	
Part 7:	Describe All Property	You Own or Have a	an Interest in That You Dic	l Not List Above	
Exam	u have other property ples: Season tickets, co				
■ No □ Yes.	Give specific informati	on			
54. Add	the dollar value of all	of your entries fr	om Part 7. Write that n	umber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Shandra M. Slaughter

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$23,000.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$2,800.00		
58.	Part 4: Total financial assets, line 36	\$12,363.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$15,163.00	Copy personal property total	\$15,163.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$38,163.00

Official Form 106A/B Schedule A/B: Property page 6

			III I WWW ZZ VI WW	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Shandra M. Slaug	ghter		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is
				amended filing

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.											
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)							
	☐ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.										
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.							
	2265 Windsor Lane Country Club	\$23,000.00		\$15,000.00	735 ILCS 5/12-901						
	Hills, IL 60478 Cook County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit							
	Misc used household goods and furnishings, including: Sofa,	\$800.00		\$800.00	735 ILCS 5/12-1001(b)						
	Loveseat, Entertainment Center, Coffee Table, End Tables, Dining Table/Chairs, Refrigerator, Freezer, Stove, Microwave, Dishwasher, Washer/Dryer, Pots/Pans, Dishes/Flatware, Vacuum, Coffee Maker, Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit							
	Television, DVD Player, Tablet, Video-Game System, Stereo, and Cell	\$600.00		\$600.00	735 ILCS 5/12-1001(b)						
	Phone. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit							
	Necessary Wearing Apparel Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(a)						

100% of fair market value, up to any applicable statutory limit

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Case number (if known)

De	Silanura W. Slauginter				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	10 Sets of Earrings, 2 Bracelets, 1 Watch, 2 Necklaces, 3 Pieces of	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
	Costume Jewelry Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$7.00		\$7.00	735 ILCS 5/12-1001(b)
	Line from Scriedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: First Midwest Bank Line from Schedule A/B: 17.1	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
	Line Irom Scriedule AVB. 17.1			100% of fair market value, up to any applicable statutory limit	
	401(k): Through Employer	\$12,296.00		100%	735 ILCS 5/12-1006
	No cash surrender value Line from <i>Schedule A/B</i> : 21.1			100% of fair market value, up to any applicable statutory limit	
	Term Life Insurance Policy through Employer - No Cash Surrender Value	\$0.00		\$0.00	215 ILCS 5/238
	Beneficiary: Jaylah Slaughter Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmer	nt.)
	■ No	,			,
	 Yes. Did you acquire the property covered 	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No		•	, , ,	

			Document	Page 2	4 of 66		
Fill	in this information	n to identify you	r case:				
Deb	otor 1 Sh	nandra M. Slau	ighter				
		st Name	Middle Name	Last Name		-	
	otor 2		Art III Al			_	
(Spot	use if, filing) Firs	st Name	Middle Name	Last Name			
Unit	ed States Bankrup	tcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS		_	
0							
(if kno	e number 					☐ Chec	k if this is an
`	,						nded filing
							9
Off	icial Form 10	6D					
Sc	hedule D:	 Creditors	Who Have Claims S	Secure	ed by Propert	v	12/15
		o. our.o. o	Title Have Glanne	, , , , , , , , , , , , , , , , , , ,	и Бутторого	· J	,.0
			f two married people are filing togethe out, number the entries, and attach it to				
	per (if known).	nonarrage, mrte	at, number the chines, and attach it to	, tili3 101111.	on the top of any addition	mai pages, write your i	ame and case
1. Do	any creditors have	claims secured by	your property?				
	☐ No. Check this b	oox and submit th	nis form to the court with your other s	chedules.	You have nothing else	to report on this form.	
	■ Yes. Fill in all of	the information b	pelow		ŭ	·	
			Delow.				
Par	List All Sec	ured Claims			, Column A	Column B	Column C
			nore than one secured claim, list the cred		ly	Value of collateral	Unsecured
			s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Do not deduct the	that supports this	portion
] O I- O I 3	F	Barrier de la companya de la company		value of collateral.	claim	If any
2.1	Cook County 7	reasurer	Describe the property that secures the		\$1,684.26	\$23,000.00	\$0.00
	118 North Clark Street, Suite 1121 31-03-201-120-0000 Chicago, IL 60602		2265 Windsor Lane Country (Hills, IL 60478 Cook County	Club			
			Tillis, IL 00470 COOK County				
			As of the date you file, the claim is: C apply.	heck all that			
			Contingent				
	Number, Street, City, S	state & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who	o owes the debt? C	heck one.	Nature of lien. Check all that apply.				
	Debtor 1 only		☐ An agreement you made (such as m	ortgage or s	ecured		
	Debtor 2 only		car loan)				
	Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
	At least one of the deb	tors and another	☐ Judgment lien from a lawsuit				
	Check if this claim re	elates to a	Other (including a right to offset)	Real esta	te taxes		
	community debt						
Date	debt was incurred	2017	Last 4 digits of account number	er			
2.2	Cook County 7	Freasurer	Describe the property that secures the	e claim:	\$6,000.00	\$23,000.00	\$0.00
	Creditor's Name		2265 Windsor Lane Country	Club			
			Hills, IL 60478 Cook County				
	118 North Clar	k Street	As of the date you file, the claim is: O	heck all that			
	Suite 112 Chicago, IL 60	602	apply.				
	Number, Street, City, S		Contingent				
	Number, Street, City, S	tate & Zip Code	☐ Unliquidated ☐ Disputed				
Who	owes the debt? C	heck one.	Nature of lien. Check all that apply.				
_			☐ An agreement you made (such as m	ortgage or s	ecured		
■ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 2 only							
	Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
	At least one of the deb		☐ Judgment lien from a lawsuit				
_	Check if this claim re			Real esta	te taxes		
	community debt						
Date	debt was incurred	2014	Last 4 digits of account number	er			
		_•		-			

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Debtor 1 Shandra M. Slaughter			Case	Case number (if know)			
	First Name Middle N	ame Last Name		_			
2.3	Provincetown Improvement Assoc	Describe the property that secures the cl	aim:	\$1,952.23	\$23,000.00	\$0.00	
	Creditor's Name	2265 Windsor Lane Country Clu Hills, IL 60478 Cook County	b				
	4000 Provincetown Road Country Club Hills, IL 60478	As of the date you file, the claim is: Check apply. Contingent	all that				
-	Number, Street, City, State & Zip Code	☐ Unliquidated					
Who	owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
_	ebtor 1 only ebtor 2 only	☐ An agreement you made (such as mortg car loan)	age or secured				
□ De	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)				
☐ At	least one of the debtors and another	☐ Judgment lien from a lawsuit					
	heck if this claim relates to a ommunity debt	Other (including a right to offset)	meowners A	ssociation Fees			
Date	debt was incurred	Last 4 digits of account number					
Add	I the dollar value of your entries in C	column A on this page. Write that number h	ere:	\$9,636.49			
	nis is the last page of your form, add te that number here:	the dollar value totals from all pages.		\$9,636.49)		
Part	2: List Others to Be Notified for	or a Debt That You Already Listed					
trying than	to collect from you for a debt you o	e notified about your bankruptcy for a deb owe to someone else, list the creditor in Par t you listed in Part 1, list the additional cred nis page.	rt 1, and then lis	t the collection agency	here. Similarly, if you h	ave more	
	Name, Number, Street, City, State & Cook County Clerk's Office		On which line	in Part 1 did you enter th	ne creditor? 2.2		
118 N. Clark St., Room 434 31-03-201-120-0000 Chicago, IL 60602 Last 4 digits of account number							
	Name, Number, Street, City, State & Cook County Treasurer	Zip Code	On which line	in Part 1 did you enter th	ne creditor? 2.2		
118 North Clark Street, Suite 112 31-03-201-120-0000 Chicago, IL 60602			Last 4 digits o	f account number			

	0000 17 17020	Document Document	Page 2	6 of 66	COO MAIN	
Fill in th	is information to identify your					
Debtor 1	Shandra M. Slau	ahtor				
DODIOI I	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if,	filing) First Name	Middle Name	Last Name			
United S	states Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS			
Case nu	mhor					
(if known)				П	Check if this is an	
					amended filing	
· · ·						
	II Form 106E/F					
Sched	dule E/F: Creditors V	Vho Have Unsecured	Claims		12/15	
Schedule eft. Attacl	D: Creditors Who Have Claims Se	cured by Property. If more space is ge. If you have no information to re	needed, copy t	any creditors with partially secured clai the Part you need, fill it out, number the do not file that Part. On the top of any ac	entries in the boxes on the	
1. Do a	ny creditors have priority unsecure	ed claims against you?				
■ N	o. Go to Part 2.					
☐ Ye	es.					
Part 2:	List All of Your NONPRIORI	TY Unsecured Claims				
3. Do a	ny creditors have nonpriority unse	ecured claims against you?				
ПΝ	o. You have nothing to report in this	part. Submit this form to the court with	your other sche	edules.		
■ Y	es.					
unse	cured claim, list the creditor separate one creditor holds a particular claim,	ly for each claim. For each claim listed	l, identify what t	holds each claim. If a creditor has more ype of claim it is. Do not list claims already three nonpriority unsecured claims fill out	included in Part 1. If more	
	-				Total claim	
4.1	Capital One Auto Finance	Last 4 digits of acc	ount number	1001	\$6,291.00	
	Nonpriority Creditor's Name					
	Attn: General	William and a late	10	Opened 09/10 Last Active		
	Correspondence/Bankrupt Po Box 30285	Cy When was the debt	incurred?	11/15/13		
	Salt Lake City, UT 84130		en			
	Number Street City State ZIp Code Who incurred the debt? Check one	=	file, the claim i	s: Check all that apply		
	■ Debtor 1 only					
	_	☐ Contingent				
☐ Debtor 2 only ☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:						
	At least one of the debtors and ar		arr unsecure	J Clailli.		
	☐ Check if this claim is for a com debt	iniunity	ng out of a sepa	ration agreement or divorce that you did no	ot	
I	s the claim subject to offset?	report as priority clai	ms			
	No	·	•	g plans, and other similar debts		
	☐ Yes	■ Other. Specify	Automobile	•		

Debtor 1 Shandra M. Slaughter

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Case number (if know)

4.2	City of Chicago Corporate Counselor	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 121 N. LaSalle Street Suite 600	When was the debt incurred?	
	Chicago, IL 60602		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Fines	
4.3	Comcast Nonpriority Creditor's Name	Last 4 digits of account number	\$900.00
	PO Box 3002	When was the debt incurred?	
	Southeastern, PA 19398-3002		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	Other. Specify Utility	
4.4	ComEd	Last 4 digits of account number	¢4 427 44
4.4	ComEd Nonpriority Creditor's Name	Last 4 digits of account number	\$1,437.11
	3 Lincoln Center	When was the debt incurred?	
	Attn: Bkcy Group-Claims		
	Department		
	Oakbrook Terrace, IL 60181 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	ne or the date you me, the chamber of look an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Utilities	

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handra M. Slaughter Case number (if know)

Debtor	1 Shandra M. Slaughter	——————————————————————————————————————	Case number (if know)	
4.5	Credit Acceptance	Last 4 digits of account number	6414	\$6,328.00
	Nonpriority Creditor's Name 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034	When was the debt incurred?	Opened 9/27/14 Last Active 3/30/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	_	Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No	· · ·		
	Yes	Other. Specify Automobile	9	
4.6	Fed Loan Sevicing Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$1,515.00
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 6/08/12 Last Active 02/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	□ Yes	Other. Specify		
		Educationa	ıl	
4.7	Fed Loan Sevicing Nonpriority Creditor's Name	Last 4 digits of account number	0002	\$278.00
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 6/08/12 Last Active 02/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin		
	□ Yes	☐ Other. Specify		
	LI 162	Educationa	ı	

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Case number (if know)

Shandra W. Slaughter		Case number (ii know)			
Max Lend	Last 4 digits of account number	6474	\$2,207.04		
PO Box 639	When was the debt incurred?	2/23/2017			
	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.	no or the date you me, the damin	o. Onook all that apply			
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify				
Metropitn Au	Last 4 digits of account number	3469	\$0.00		
Nonpriority Creditor's Name	_	On an ad 40/40/00 I and Antina			
2212 W 147th St	When was the debt incurred?	="			
Dixmoor, IL 60426	when was the dept incurred:	11/10			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another					
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
■ No	Debts to pension or profit-sharing				
☐ Yes	Other. Specify Notice Only	<u>/</u>			
National Collegiate Trust	Last 4 digits of account number		\$21,390.00		
Nonpriority Creditor's Name	=		. ,		
	When was the debt incurred?				
	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.	•	,			
☐ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only					
☐ Debtor 1 and Debtor 2 only					
At least one of the debtors and another	•	d claim:			
	☐ Student loans				
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Student Lo				
	Max Lend Nonpriority Creditor's Name PO Box 639 Parshall, ND 58770 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes MetropItn Au Nonpriority Creditor's Name 2212 W 147th St Dixmoor, IL 60426 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes National Collegiate Trust Nonpriority Creditor's Name 322 Lakeside PL 2015 M5 000570 Cleveland, OH 44113 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Cleveland, OH 44113 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Cleveland, OH 44113 Number Street City State Zlp Code Who incurred the debt? Check one. Cleveland, OH 44113 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No	Max Lend Nonpriority Creditor's Name PO Box 639 Parshall, ND 58770 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 3 only □ Debtor 4 only □ Debtor 4 only □ Debtor 5 only □ Debtor 5 only □ Debtor 6 only □ Debtor 6 only □ Debtor 7 only □ Debtor 8 only 6 onl	Max Lend		

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Peoples Gas	Last 4 digits of account number	\$800.0
Nonpriority Creditor's Name 130 E. Randolph Dr.	When was the debt incurred?	
Chicago, IL 60601 Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the ordinas. Oneok an that apply	
■ Debtor 1 only	☐ Contingent	
□ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Utility Bills or Cellular Service	
Provincetown Improvement Assoc	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name	Last 4 digits of account number	ΨΟι
4000 Provincetown Road 2016 M6 009220	When was the debt incurred?	
Country Club Hills, IL 60478 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Notice Only: Case Dismissed	
Receivable Management	Last 4 digits of account number 7817	\$115.0
Nonpriority Creditor's Name	When we the debt insured? Opened 44/45	
240 Emery St Bethlehem, PA 18015	When was the debt incurred? Opened 11/15	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Collection Attorney Progressive Northern Other. Specify Ins Co.	
□ res	Other. Specify Ins Co	

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Document Page 31 of 66 Debtor 1 Shandra M. Slaughter Case number (if know) 4.1 Tennesse Department of Safety \$487.00 Last 4 digits of account number 4 Nonpriority Creditor's Name When was the debt incurred? PO Box 945 Nashville, TN 37202 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Fines ☐ Yes 4.1 **University of Chicago Hospital** \$15,000.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 5841 S. Maryland When was the debt incurred? Chicago, IL 60637 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical or Dental services ☐ Yes 4.1 Us Dept Ed 8622 \$418.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Ecmc/Bankruptcy Opened 10/01 Last Active Po Box 16408 When was the debt incurred? 3/27/17 St Paul, MN 55116 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Educational

Student loans

☐ Other. Specify

report as priority claims

debt

■ No

☐ Yes

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Case number (if know)

اماماح	Shandra W. Slaughter		Case number (ii know)	
4.1 7	Us Dept Ed	Last 4 digits of account number	8631	\$398.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 St Paul, MN 55116	When was the debt incurred?	Opened 10/02 Last Active 3/27/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	<u> </u>	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other Specify		
	— 160	Educationa	 al	
				
4.1 3	Us Dept Ed	Last 4 digits of account number	7732	\$192.00
	Nonpriority Creditor's Name		Opened 42/04 Leet Active	
	Ecmc/Bankruptcy Po Box 16408	When was the debt incurred?	Opened 12/01 Last Active 3/27/17	
	St Paul, MN 55116		<u> </u>	
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	Пол		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	Student loans	a Gainn	
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	al .	
is try have notifi	List Others to Be Notified About a De his page only if you have others to be notified ing to collect from you for a debt you owe to smore than one creditor for any of the debts the defor any debts in Parts 1 or 2, do not fill out and Address	about your bankruptcy, for a debt that y omeone else, list the original creditor ir at you listed in Parts 1 or 2, list the addi	Parts 1 or 2, then list the collection agency tional creditors here. If you do not have add	here. Similarly, if you
	ld Scott Harris, P.C.	·	Part 1: Creditors with Priority Unsecured Claim	ms
_	V. Jackson Blvd		Part 2: Creditors with Nonpriority Unsecured	
Ste 6	00 ago, IL 60604		• •	
Cilica	igo, ic 00004	Last 4 digits of account number		
Vlame s	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	of Chicago		Part 1: Creditors with Priority Unsecured Claim	ms
P.Ö. I	of Revenue Box 88292	_	Part 2: Creditors with Nonpriority Unsecured	
Chica	ago, IL 60680-1292	Last 4 digits of account number		
Vame s	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	of Chicago Dept. of Finance	·	Part 1: Creditors with Priority Unsecured Claim	ms
	ox 6330		Part 2: Creditors with Nonpriority Unsecured	Claims
Unica	ago, IL 60680	Last 4 digits of account number	•	

Official Form 106 E/F

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Name and Address Sallie Mae 220 Laslev Ave Hanover TWP, PA 18706-1496 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Classes and Part 2: Creditors with Nonpriority Unsecured Classes 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	
220 Laslev Ave Hanover TWP, PA 18706-1496 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	
Hanover TWP, PA 18706-1496 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	1 Claims
Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	
· · · · · · · · · · · · · · · · · · ·	
Secretary of State	
Secretary of State Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Cla	aims
Safety & Financial 2701 S. Dirksen Parkway Part 2: Creditors with Nonpriority Unsecured	l Claims
Springfield, IL 62723	
Last 4 digits of account number	
Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	
Tressler, LLP Line <u>4.12</u> of (<i>Check one</i>): ☐ Part 1: Creditors with Priority Unsecured Cla	aims
233 S. Wacker, 22nd Floor 2016 M6 009220 Part 2: Creditors with Nonpriority Unsecured	l Claims
Chicago, IL 60606	
Last 4 digits of account number	
Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	
University of Chicago Hospital Line <u>4.15</u> of (Check one): □ Part 1: Creditors with Priority Unsecured Cla	iims
1122 Paysphere Circle Chicago, IL 60674 Part 2: Creditors with Nonpriority Unsecured	l Claims
Last 4 digits of account number	
Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	
University of Chicago Hospital Line <u>4.15</u> of (<i>Check one</i>): □ Part 1: Creditors with Priority Unsecured Cla	aims
8201 S. Cass Ave. Part 2: Creditors with Nonpriority Unsecured	l Claims
Darien, IL 60561 Last 4 digits of account number	
Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?	
Weltman Weinberg & Reis Line <u>4.10</u> of (<i>Check one</i>): □ Part 1: Creditors with Priority Unsecured Cla	aims
180 N. LaSalle Street, Suite 240 Part 2: Creditors with Nonpriority Unsecured	l Claims
2015 M5 000570 Chicago, IL 60601	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Γotal Claim
	6f.	Student loans	6f.	\$	2,801.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	55,455.15
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	58,256.15

		Docume	ni Paue 34 01 00					
Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Shandra M. Slaug	ghter						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS					
Case number								
(if known)				☐ Check if this is an				
				amended filing				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		Clair		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5	· · · · · · · · · · · · · · · · · · ·				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	,		3. 4.0		

		Documei	nt Page 35 of	66	
Fill in this infor	mation to identify your	case:			
Debtor 1	Shandra M. Slaug	hter			
200101 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	
Official Fo	orm 106H				
	H: Your Code	ebtors		12/15	
nour name and of 1. Do you h □ No ■ Yes 2. Within th	case number (if known) have any codebtors? (If y	. Answer every question.	do not list either spouse as	? (Community property states and territories include	
■ No. Go to	ling 2				
_		use, or legal equivalent live	with you at the time?		
55. 516	,	, 1090. 040.10.01111110			
in line 2 ag	ain as a codebtor only it), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make su	f your spouse is filing with you. List the person show ure you have listed the creditor on Schedule D (Offic G). Use Schedule D, Schedule E/F, or Schedule G to	ial
	nn 1: Your codebtor Number, Street, City, State and ZII	P Code		Column 2: The creditor to whom you owe the debracheck all schedules that apply:	t
3.1 Pegg	ıy Blissitt			□ Schodulo D. lino	
	W. 64th Street			Schedule D, line	
	ago, IL 60636				
				National Collegiate Trust	
				■ Schedule E/F, line <u>4.10</u> □ Schedule G National Collegiate Trust	

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						•				
	in this information to identify your case: btor 1 Shandra M. Slaughter									
	otor 2	m. olaughter			_					
(Spc	buse, if filing)									
Uni	ted States Bankruptcy Court fo	r the: NORTHERN DISTRIC	CT OF ILLINOIS		_					
Cas	se number				Check if this is:					
(If kr	nown)					☐ An amended filing				
								ent showing as of the follo		
\bigcirc	fficial Form 106I								ownig dato.	
	chedule I: Your II	MM / DD/ YYYY 12/1								
spo atta	plying correct information. If use. If you are separated and ch a separate sheet to this for the Describe Employment 1:	your spouse is not filing wirm. On the top of any additi	th you, do not inc	lude infor	mati	on about	your spo	use. If more	e space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2 or non-filing spouse			
	If you have more than one job), F	■ Employed				☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	tion OPS Manager							
	Include part-time, seasonal, o self-employed work.	Employer's name	Courtyard by	Marrriot (Э'На	are				
	Occupation may include stud or homemaker, if it applies.	ent Employer's address	2950 S. River Des Plaines, I							
		How long employed t	here? 13 Ye	ars						
Par	t 2: Give Details About	Monthly Income								
spou	mate monthly income as of the unless you are separated. The or your non-filing spouse have		,	•		·			·	J
more	e space, attach a separate she	et to this form.								
						For Deb	tor 1	For Debt	or 2 or g spouse	
2.	List monthly gross wages, deductions). If not paid mont		2.	\$	4,	371.00	\$	N/A	-	
3.	Estimate and list monthly o	vertime pay.		3.	+\$		0.00	+\$	N/A	1

4,371.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	otor 1	Shandra M. Slaughter	-	(Case i	number (<i>if k</i>	nown)				
						Debtor 1			ebtor :	2 or pouse	
	Cop	by line 4 here	4.	•	\$_	4,37	1.00	\$		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	58	1.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	b.	\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$		0.00	\$		N/A	_
	5e.	Insurance	56		\$		9.00	\$		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f 5g		\$ \$		0.00	\$		N/A N/A	_
	5g. 5h.	Other deductions. Specify:	-	y. h.+	\$ -			+ \$		N/A N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6. 6.		\$ \$		0.00	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* — \$	3,41		\$		N/A	-
			٠.		Ψ_	3,41	1.00	Ψ		11//	-
8.	8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.		ф.			r.			
	Oh	monthly net income. Interest and dividends	88 8b	a.	\$ \$		0.00	\$		N/A	_
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent		0.	Φ_		0.00	Φ		N/A	_
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	n:	\$		0.00	\$		N/A	
	8d.	Unemployment compensation	80		<u>\$</u> —		0.00	\$		N/A	_
	8e.	Social Security	86		\$		0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$		0.00	\$		N/A	_
	8g.	Pension or retirement income	80	-	\$		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8r _	h.+	\$		0.00	+ \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.00	\$		N/A	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,411.00	+ \$		N/A	= \$	3,411.00
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ-		3,411.00	┤		17/	- • -	3,411.00
11.	Sta Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	dep						chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	3,411.00
13.	Do	you expect an increase or decrease within the year after you file this form	?						L	Combi	ned ly income
		No.									

Official Form 106I Schedule I: Your Income page 2

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	in this is	tion to identify				1		
Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Shandra M. S	Slaughte	r			c if this is:	
Deb	otor 2					_	An amended filing A supplement shov	ving postpetition chapter
(Spo	ouse, if filing)							the following date:
Unit	ed States Bankr	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS	1	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	nses				12/15
Be	as complete a ormation. If m mber (if know	and accurate as	possible eded, atta y questio	. If two married people and the control of the cont				
1.	Is this a joir		illoiu					
	■ No. Go to		n a separ	ate household?				
	□ Y	es. Debtor 2 mus	st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debte	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.		Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		02	■ Yes
								□ No
								☐ Yes ☐ No
								□ NO □ Yes
								□ No
								☐ Yes
3.		enses include		No				00
		f people other ti d your depende	han $_{oxdotsim}$	Yes				
Par	t 2: Estim	ate Your Ongoi	na Month	ly Expanses				
Est exp	imate your ex	penses as of yo	our bankr	uptcy filing date unless y y is filed. If this is a supp				
Incl the	lude expense value of such	s paid for with i	non-cash d have ind	government assistance i	f you know Your Income			
(Off	ficial Form 10	6I.)					Your exp	enses
4.		or home owners and any rent for the		ases for your residence. I or lot.	nclude first mortgag	e 4. \$		0.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		300.00
		rty, homeowner's				4b. \$		50.00
				upkeep expenses		4c. \$		100.00
5		owner's associat		dominium dues our residence. such as ho	umo oquity loopo	4d. \$ 5. \$		130.00 0.00
o.	AUGILIONALI	nonuaue Davme	anta lor ve	Jul residence, SUCD AS DO	ine equity igans	ე. გ		(1 ()()

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Debtor 1 S	handra M. Slaughter	Case num	ber (if known)	
6. Utilities	·			
	lectricity, heat, natural gas	6a.	\$	300.00
	Vater, sewer, garbage collection	6b.		35.00
	elephone, cell phone, Internet, satellite, and cable services	6c.		0.00
	Other. Specify: Cell Phone	6d.		99.00
	nd housekeeping supplies	7.	\$	575.00
	are and children's education costs	7. 8.	\$	
		9.		860.00
	g, laundry, and dry cleaning			150.00
	al care products and services	10.	·	150.00
	I and dental expenses	11.	\$	70.00
	ortation. Include gas, maintenance, bus or train fare.	12.	\$	255.00
	nclude car payments.	13.	·	
	inment, clubs, recreation, newspapers, magazines, and books			0.00
	ble contributions and religious donations	14.	\$	0.00
5. Insura n				
	nclude insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	ife insurance	15a.		0.00
	lealth insurance	15b.		0.00
	ehicle insurance	15c.	*	0.00
	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
	nent or lease payments:			
	ar payments for Vehicle 1	17a.	*	0.00
17b. C	ar payments for Vehicle 2	17b.	\$	0.00
17c. C	Other. Specify:	17c.	\$	0.00
17d. C	Other. Specify:	17d.	\$	0.00
3. Your pa	ayments of alimony, maintenance, and support that you did not report a	s		
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	. 18.	\$	0.00
Other p	payments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	eal property expenses not included in lines 4 or 5 of this form or on Sch			
20a. N	lortgages on other property	20a.	\$	0.00
20b. R	teal estate taxes	20b.	\$	0.00
20c. P	roperty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. N	faintenance, repair, and upkeep expenses	20d.	\$	0.00
	lomeowner's association or condominium dues	20e.	\$	0.00
. Other:		21.	·	0.00
. • • • • • • • • • • • • • • • • • • •			- Ψ	0.00
 Calcula 	ite your monthly expenses			
22a. Ad	d lines 4 through 21.		\$	3,074.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	d line 22a and 22b. The result is your monthly expenses.		\$	3,074.00
o. /\u	a mile and and and interest to your morning expension.			3,07 7.00
	ite your monthly net income.			
23a. C	copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,411.00
23b. C	Copy your monthly expenses from line 22c above.	23b.	-\$	3,074.00
	• •			-,-
23c. S	subtract your monthly expenses from your monthly income.			
	he result is your monthly net income.	23c.	\$	337.00
	•			
	expect an increase or decrease in your expenses within the year after y			
	nple, do you expect to finish paying for your car loan within the year or do you expect you	ur mortgage p	payment to increa	ase or decrease because o
_	tion to the terms of your mortgage?			
■ No.				
П Удс	Explain here:			

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Fill in thi	s information to identify your	case:			
Debtor 1	Shandra M. Slaug	ghter			
	First Name	Middle Name	Last Name		
Debtor 2	<u> </u>				
(Spouse if, fi	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
0	art				
Case nur	nber				☐ Check if this is an
,					amended filing
					-
Official	Form 106Dec				
	aration About a	n Individus	I Dobtor's S	chodulos	
DECI	aration About a	<u>III IIIuiviuua</u>	וו הבמוחו פי פי	cileuules	12/15
lf tura mai	rried people are filing togethe	- beth ore equally reco	anaihla far aumuluina aa	wast information	
ii two iiia	Thed people are ming togethe	i, both are equally resp	onsible for supplying co	irect imormation.	
You must	file this form whenever you fi	ile bankruptcy schedule	es or amended schedule	s. Making a false state	ement, concealing property, or
obtaining	money or property by fraud i	n connection with a bar	nkruptcy case can result	in fines up to \$250,00	0, or imprisonment for up to 20
years, or	both. 18 U.S.C. §§ 152, 1341, 1	1519, and 3571.			
	Sign Below				
	Sign Below				
D:4	nav az agras ta nav asma	ana wha ia NOT an att	amay ta bala yay fill aut	hankuuntav farma?	
Dia	you pay or agree to pay some	one who is NOT an atto	orney to help you fill out	bankruptcy forms?	
_	No				
-					
	Yes. Name of person				kruptcy Petition Preparer's Notice,
				Declaration,	, and Signature (Official Form 119)
Unde	er penalty of perjury, I declare	that I have read the su	mmary and schedules fil	ed with this declaration	on and
that	they are true and correct.				
X /	/s/ Shandra M. Slaughter		X		
	Shandra M. Slaughter		Signature o	of Debtor 2	
	Signature of Debtor 1		Oignature c	200101 2	
	•				
I	Date June 12, 2017		Date		

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		nation to identify you							
Deb	otor 1	Shandra M. Slau First Name	Ighter Middle Name	Last Name					
	otor 2								
(Spot	use if, filing)	First Name	Middle Name	Last Name					
Unit	ted States Bar	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS					
Cas	se number					Check if this is an			
						amended filing			
Off	ficial For	m 107							
			Affairs for Individ	luals Filing for B	ankruptcy	4/10			
			ble. If two married people a						
). Answer every que		•	, , ,				
Part	Give D	etails About Your Ma	arital Status and Where You	Lived Before					
1.	What is your	current marital statu	ıs?						
	☐ Married								
	■ Not marr	ried							
2.	During the la	ıst 3 years, have you	lived anywhere other than v	where you live now?					
	□ No								
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
	10620 Broo Chicago R		From-To: 2012 to 2015	☐ Same as Debtor	I	☐ Same as Debtor 1 From-To:			
	No Yes. Mal	es include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Of r Income	vada, New Mexico, Puerto R					
	Fill in the total	I amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part-	time activities.	endar years?			
	□ No								
	_	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$17,880.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

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Debtor 1 Debtor 1 Document Page 42 of 66 Case number (if known)

				Debtor 1				Debtor 2		
				Sources of income Check all that apply.	(be	oss income fore deductions and lusions)	ı	Sources of inco Check all that ap		Gross income (before deductions and exclusions)
	For last calendar year: (January 1 to December 31, 2016)		■ Wages, commissions, bonuses, tips		\$48,930.00)	☐ Wages, combonuses, tips	missions,		
				☐ Operating a business				☐ Operating a l	ousiness	
		dar year bef December 3		■ Wages, commissions, bonuses, tips		\$47,207.00)	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business				☐ Operating a l	ousiness	
5.	Include include and other winnings. List each s	come regard public benef If you are fili	less of wheth it payments; ng a joint cas ne gross inco	e during this year or the two er that income is taxable. Ex- pensions; rental income; inter e and you have income that y me from each source separa	amples rest; di you rec	of other income are vidends; money coll- ceived together, list i	e alir lecte it on	d from lawsuits; ly once under De	royalties; an btor 1.	
				Dobton 4				Debtor 2		
				Debtor 1 Sources of income Describe below.	eac (be	oss income from th source fore deductions and lusions)	ı	Sources of inco Describe below.		Gross income (before deductions and exclusions)
Par	rt 3: List	Certain Pa	ments You	Made Before You Filed for	Bankr	uptcy				
6.	□ No.	Neither De individual puring the No. Yes	btor 1 nor D rimarily for a 90 days befor Go to line 7 List below e paid that cru not include o adjustment r Debtor 2 o 90 days befor Go to line 7 List below e include pay	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the on 4/01/19 and every 3 years r both have primarily consure you filed for bankruptcy, di	imer d id you p id a tot its for a his bar s after imer d id you p	lebts. Consumer de lose." pay any creditor a to all of \$6,425* or more domestic support obstruptcy case. that for cases filed cebts. pay any creditor a to all of \$600 or more all of \$600 or more all ose.	re in obligation of the control of t	of \$6,425* or more one or more pay tions, such as cher after the date of of \$600 or more?	e? ments and ti ild support a f adjustment	he total amount you and alimony. Also, do
	Craditari	s Name and	Address	Dates of navers	nt.	Total amount		Amount you	Was this	nayment for
	Creditor	o mante and	Audiess	Dates of payme	:111	Total amount paid		Amount you still owe	vvas tiliš į	payment for

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7.	Within 1 year before you filed for bankruptounsiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. ■ No □ Yes. List all payments to an insider.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partne r more of their voting	rships of which you securities; and a	ou are a genera iny managing a	al partner; corporations gent, including one fo
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider		•		account of a de	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	rt 4: Identify Legal Actions, Repossession	s. and Foreclosures	P			
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of th	e case
	Case number National Collegiate Trust Vs. Shandra Slaughter 2015 M5 000570	Collection	Circuit Court of County, IL	Cook	☐ Pending ☐ On appe ☐ Conclud	
					Judgment Garnishee	Against Defendant
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below. ☐ No. Go to line 11. ☐ Yes. Fill in the information below.		erty repossessed, fo	oreclosed, garni	shed, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	d			property
	National Collegiate Trust 322 Lakeside PL	Total Wages Garnish	ned:\$7,200.00	6/20	16	\$7,200.00
	2015 M5 000570 Cleveland, OH 44113	☐ Property was reposse☐ Property was foreclos				
		■ Property was garnish				
		☐ Property was attached	d, seized or levied.			
	Sallie Mae 220 Laslev Ave Hanover TWP, PA 18706-1496	☐ Property was reposse☐ Property was foreclos☐ Property was garnish	sed.	3/20	16	\$2,606.00
		☐ Property was attached				

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De	Shandra M. Slaughter		Document		ase number (if	known)	
11.	Within 90 days before you filed for ban accounts or refuse to make a payment				financial insti	tution, set off any	amounts from your
	■ No						
	☐ Yes. Fill in the details.						
	Creditor Name and Address	De	escribe the action	the creditor took		Date action was taken	Amoun
12.	Within 1 year before you filed for banks court-appointed receiver, a custodian,			perty in the posses	ssion of an as	signee for the ben	efit of creditors, a
	No						
	☐ Yes						
Pai	rt 5: List Certain Gifts and Contribution	ons					
13.	Within 2 years before you filed for bank No	kruptcy, d	did you give any g	ifts with a total valu	ie of more tha	an \$600 per person	?
	Yes. Fill in the details for each gift.		D " " "			.	
	Gifts with a total value of more than \$6 per person	500	Describe the gif	ts		Dates you gave the gifts	Valu
	Person to Whom You Gave the Gift an Address:	d					
14.	Within 2 years before you filed for banl	kruptcy, d	did you give any g	ifts or contributions	s with a total	value of more than	\$600 to any charity
	■ No						
	☐ Yes. Fill in the details for each gift or	contribut	ion.				
	Gifts or contributions to charities that more than \$600 Charity's Name		Describe what y	ou contributed		Dates you contributed	Valu
	Address (Number, Street, City, State and ZIP Co	ode)					
Pai	rt 6: List Certain Losses						
15.	Within 1 year before you filed for banks or gambling?	ruptcy or	since you filed fo	r bankruptcy, did yo	ou lose anyth	ing because of the	ft, fire, other disaste
	■ No						
	Yes. Fill in the details.						
	Describe the property you lost and	Descri	ibe any insurance	coverage for the los	ss	Date of your	Value of propert
	how the loss occurred	Include	e the amount that in	nsurance has paid. Lis 33 of <i>Schedule A/B: P</i>	st pending	loss	los
Pai	rt 7: List Certain Payments or Transfe						
16	Within 1 year before you filed for bank	runtev di	id you or anyone	alse acting on your l	hehalf nav or	transfer any prope	erty to anyone you
10.	consulted about seeking bankruptcy o Include any attorneys, bankruptcy petition	r preparii	ng a bankruptcy p	etition?			ity to anyone you
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid		Description and	l value of any propa	rtv	Date navment	Amount
	Address		transferred	I value of any prope	ii ty	Date payment or transfer was	Amount o paymen
	Email or website address	Vau				made	, ,
	Person Who Made the Payment, if Not	You	¢c0 00 f	and marries become	u ove dit	05/2047	400.0
	CIN Legal Data Services 4540 Honeywell Ct			rged, multi-bureat counseling and de		05/2017	\$60.0

Dayton, OH 45424

education courses.

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Debtor 1 Shandra M. Slaughter

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li No Yes. Fill in the details.	or to make payments			or transfer any proper	ty to anyone who		
	Person Who Was Paid Address	Description and v	alue of any prop	perty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred payments paid in ex			Date transfer was made		
19.	 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 							
	Name of trust	Description and v	alue of the prop	erty transferr	red	Date Transfer was made		
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your bene sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions,								
	houses, pension funds, cooperatives, associa No Yes. Fill in the details.	ations, and other finan	cial institutions	·				
		ast 4 digits of account number	Type of accourant instrument	clo mo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer		
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No					cory for securities,			
	Yes. Fill in the details. Name of Financial Institution	Who else had acc	ass to it?	Describe the	contents	Do you still		
	Address (Number, Street, City, State and ZIP Code)	Address (Number, State and ZIP Code)		Describe the	contents	have it?		
22.	Have you stored property in a storage unit or No Yes. Fill in the details.	place other than your	home within 1 y	year before yo	ou filed for bankruptc	y?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?		

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Debtor 1 Shandra M. Slaughter

Par	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty yo	u borrowed from, are storing fo	r, or hold in trust			
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value			
Par	t 10: Give Details About Environmental Inform	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.						
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s was	ste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of whe	n they	y occurred.				
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e und	er or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admini	strative proceeding under any env	vironm	nental law? Include settlements	and orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nati	ure of the case	Status of the case			
Par	t 11: Give Details About Your Business or Con	nections to Any Business						
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, eithe	er full-time or part-time				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Case 17-17923 Filed 06/13/17 Entered 06/13/17 11:02:58 Document Page 47 of 66 Case number (if known) Debtor 1 Shandra M. Slaughter No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Shandra M. Slaughter Signature of Debtor 2 Shandra M. Slaughter Signature of Debtor 1 Date Date June 12, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

Doc 1

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - By agreement of the parties for prepetition and preconfirmation work, including consultation, drafting petition and plan, 341 meeting, negotiation with creditors, court hearings, amendments etc.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	<i>C</i> 11	3	
Signed:			
/s/ Shandra M. Slaughter		/s/ Kevin Rouse ARDC	
Shandra M. Slaughter		Kevin Rouse ARDC #6284394	
		Attorney for the Debtor(s)	
Debtor(s)			
Do not sign this agreement if the ar	mounts are b	lank.	

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

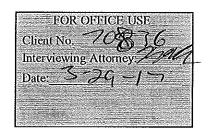
In r	e Shandra M. Slaughter		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	4,000.00	
2.	\$310.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comp	pensation with any other person un	nless they are memb	pers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				
6.	In return for the above-disclosed fee, I have agreed to re	render legal service for all aspects	of the bankruptcy ca	ase, including:	
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, states c. Representation of the debtor at the meeting of credited d. [Other provisions as needed] Exemption planning; preparation and financial filing of motions pursuant to 11 US 	tement of affairs and plan which n tors and confirmation hearing, and iling of reaffirmation agreeme	nay be required; any adjourned hear	rings thereof;	
7.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis-			/ proceeding.	
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	ny agreement or arrangement for p	ayment to me for re	epresentation of the debtor(s) in	
	June 12, 2017	/s/ Kevin Rouse AF	RDC		
1	Date	Kevin Rouse ARDO			
		Signature of Attorney Ledford, Wu & Bor			
		105 W. Madison	3 ,		
		23rd Floor Chicago, IL 60602			
		312-853-0200 Fax:	: 312-873-4693		
		notice@billbusters	s.com		
		Name of law firm			

BILLBUSTERS

Ledford, Wu and Borges, LLC

Attorneys at Low 105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

CONSULTATION AGREEMENT



THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- 4. Services: The attorney agrees to provide Client with the following services:
 - a. analyzing Client's financial circumstances based on information provided by Client;
 - b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
 - c. if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's options, informing Client what additional information Client needs to provide in order to enable Attorney to provide such advice and information;
 - d. where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and
 - e. to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client

5. Fees (check one):
A consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-client relationship shall terminate at the conclusion of the interview
Client agrees to pay \$ in nonrefundable consultation fee
In the event Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged for the case, and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed by Client and Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed explanation of the parties' obligations and a breakdown of the costs.
6. Acknowledgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to Client is the date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure and information mandated by Section 527(b) of the Bankruptcy Code.
x Date: 3,29,17
Attorney Signature: ARDC #: 6284394

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Disclosure Pursuant to 11 U.S.C. §527(a)(2)

You are notified:

- 1. All information that you are required to provide with a petition and thereafter during a case under the Bankruptcy Code is required to be complete, accurate, and truthful.
- 2. All assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case. Some places in the Bankruptcy Code require that you list the replacement value of each asset. This must be the replacement value of the property at the date of filing the petition, without deducting for costs of sale or marketing, established after a reasonable inquiry. For property acquired for personal, family, or household use, replacement value means the price a retail merchant would charge for property of that kind, considering the age and condition of the property.
- 3. The following information, which appear on Official Form 22, Statement of Current Monthly Income, are required to be stated after reasonable inquiry: current monthly income, the amounts specified in section 707(b)(2), and, in a case under chapter 13 of the Bankruptcy Code, disposable income (determined in accordance with section 707(b)(2)).
- 4. Information that you provide during your case may be audited pursuant to provisions of the Bankruptcy Code. Failure to provide such information may result in dismissal of the case under this title or other sanction, including criminal sanctions.

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules and Statement of Financial Affairs, as well as in some cases a Statement of Intention need to be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of the creditors where you may be questioned by a court official called a 'trustee' and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than chapter 7 or chapter 13, you will want to find out what should be done from someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in

Received on:

Signed

Print Name:

Signed:

Print Name:

LEDGUMENVU &PRORGES, OLIGO.

105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

ATTORNEY RETENTION CONTRACT



1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means Ledford, Wu & Borges, LLC and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of inconsistency. In the event of any inconsistency between this contract and a Court-Approved Retention Agreement, the latter shall prevail.

2. Services: Client retains Attorney for the following services: ☑ Chapter 13 bankruptcy (debt adjustment)
 3. Scope of Representation: (a) Attorney will counsel and represent Client in all aspects of the above matter(s) for the fee specified in Paragraph 4 EXCEPT: (1) adversary proceedings; (2) post-discharge litigation; (3) appeals; (4) other (specify): (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed upon separately by the parties.
4. Fees: Legal fee: \$\frac{1000}{1000} \text{PLUS Expenses:} \frac{60}{1000} \text{ proved Retention Agreement may apply also)} Total be paid before filing: \$\frac{370}{1000} \text{ with payroll control;} \$\frac{1000}{1000} \text{ mithout payroll control;} \$\frac{1000}{1000} \text{ inside plan of the legal fee is an \$\frac{1000}{1000} \text{ advance payment retainer } \frac{1000}{1000} \text{ security retainer } classic retainer, and is a flat fee unless otherwise stated. Aftorney is unable to represent Client without receiving an advance payment retainer since a security retainer will be within the reach of Client's creditors. Should hourly billing be necessary, Attorney's billing rates are \$300-\$400/hour for partners, \$250/hour for associates, and \$90/hour for law clerks. The filing fee and expenses are subject to change at any time. The billing rates are subject to an annual review and potential increase every calendar year. The legal fee covers the initial consultation and all subsequent work. The case may be closed if the fees are not paid by the deadline. Additional legal fees may apply if the parties have entered into a Court-Approved Retention Agreement and such Agreement so authorizes, or if the case is converted from one chapter to another. Additional court costs may apply for amending a petition, list, schedule or statement post-filing or other reasons not due to Attorney's fault. NSF checks will be assessed a \$20 fee.
The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2 The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures The difference among various types of retainer and that Client has made the choice identified in Paragraph 4 A Chapter 13 plan will be submitted to the Court in good faith. The plan payment may have to increase if creditor claims come in higher than scheduled, creditors successfully argue that they are entitled to a higher interest rate, the Trustee successfully argues that the budgeted income is lower than actual income, the Trustee successfully argues that budgeted expenses are unreasonably high or the Court makes a finding that the plan is not the best effort you can make to repay your creditors. TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or otherwise adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested documents and/or information, including but not limited to a certificate of credit counseling, are received by Attorney Other (specify): Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed.
 6. Client's Duties. Client agrees, during the course of representation, to: (a) provide Attorney with full, accurate and timely information, financial and otherwise; (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents and information; (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty; (d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or line of credit, or using an existing credit card or line of credit; and (e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.
7. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ outside counsel, at Attorney's expense, to work on this case, including: Kathleen W. Vaught, Kelly M. Johnson, David Carter, or Christina Banyon.
8. Termination . Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, and Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein. Date: 5 / 8 / / 7
Attorney Signature: ARDC # Copyright © 2015 Ledford, Wu & Borges, LLC.

United States Bankruptcy Court Northern District of Illinois

In re	Shandra M. Slaughter		Case No.		
		Debtor(s)	Chapter 13		
	VEI	RIFICATION OF CREDITOR MA	ATRIX		
		Number of C	Creditors:	30	
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	ors is true and correct to	the best of my	
Date:	June 12, 2017	/s/ Shandra M. Slaughter Shandra M. Slaughter Signature of Debtor			

Arnold Scott Harris, P.C. 111 W. Jackson Blvd Ste 600 Chicago, IL 60604

Capital One Auto Finance Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

City of Chicago Dept of Revenue P.O. Box 88292 Chicago, IL 60680-1292

City of Chicago Corporate Counselor 121 N. LaSalle Street Suite 600 Chicago, IL 60602

City of Chicago Dept. of Finance PO Box 6330 Chicago, IL 60680

Comcast PO Box 3002 Southeastern, PA 19398-3002

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181

Cook County Clerk's Office 118 N. Clark St., Room 434 31-03-201-120-0000 Chicago, IL 60602

Cook County Treasurer 118 North Clark Street, Suite 1121 31-03-201-120-0000 Chicago, IL 60602 Cook County Treasurer 118 North Clark Street Suite 112 Chicago, IL 60602

Cook County Treasurer 118 North Clark Street, Suite 112 31-03-201-120-0000 Chicago, IL 60602

Credit Acceptance 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034

Fed Loan Sevicing Po Box 69184 Harrisburg, PA 17106

Max Lend PO Box 639 Parshall, ND 58770

Metropltn Au 2212 W 147th St Dixmoor, IL 60426

National Collegiate Trust 322 Lakeside PL 2015 M5 000570 Cleveland, OH 44113

Peggy Blissitt 1314 W. 64th Street Chicago, IL 60636

Peoples Gas 130 E. Randolph Dr. Chicago, IL 60601

Provincetown Improvement Assoc 4000 Provincetown Road 2016 M6 009220 Country Club Hills, IL 60478

Provincetown Improvement Assoc 4000 Provincetown Road Country Club Hills, IL 60478

Receivable Management 240 Emery St Bethlehem, PA 18015

Sallie Mae 220 Laslev Ave Hanover TWP, PA 18706-1496

Secretary of State Safety & Financial 2701 S. Dirksen Parkway Springfield, IL 62723

Tennesse Department of Safety PO Box 945 Nashville, TN 37202

Tressler, LLP 233 S. Wacker, 22nd Floor 2016 M6 009220 Chicago, IL 60606

University of Chicago Hospital 5841 S. Maryland Chicago, IL 60637

University of Chicago Hospital 1122 Paysphere Circle Chicago, IL 60674

University of Chicago Hospital 8201 S. Cass Ave. Darien, IL 60561

Us Dept Ed Ecmc/Bankruptcy Po Box 16408 St Paul, MN 55116 Weltman Weinberg & Reis 180 N. LaSalle Street, Suite 240 2015 M5 000570 Chicago, IL 60601